

Inventor Information

Inventor One Given Name::	Michael D.
Family Name::	Mason
Postal Address Line One::	235 Cypress Street, Suite 200
City::	Brookline
State or Province::	MA
Postal or Zip Code::	02445
Country::	United States
Citizenship Country::	United States

Correspondence Information

Correspondence Customer Number::	02101
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Application Information

Title Line One::	Method for Graftless Spinal Fusion
Total Drawing Sheets::	7
Formal Drawings?::	Yes
Application Type::	Utility
Docket Number::	2731/103

Representative Information

Representative Customer Number::	48,241
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Continuity Information

This application is a::	Divisional of
> Application One::	09/976,685
Filing Date::	October 11, 2001

Which is a::	Non-Provisional of Provisional
>>Application Two::	60/239,368
Filing Date::	October 11, 2000